**ASIAN PARLIAMENTARY ASSEMBLY**

**The Meeting of APA Standing Committee on**

**Budget and Planning**

**3 - 5 September 2019**

**Baghdad, Iraq**

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**REGISTRATION FORM**

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Please fill in one form for each participating delegate in CAPITAL letters

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| **DELEGATE DETAILS** | | | |
| Country: |  | Name of Parliament: |  |
| Salutation | ( ) Mr. ( ) Ms. | | |
| First Name |  | | |
| Last Name |  | | |
| Position | ( ) Head of Delegation ( ) Member of Parliament ( ) Officer | | |
| Tel. No. |  | | |
| Mobile No. |  | | |
| Fax No. |  | | |
| Email Address |  | | |

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| **PASSPORT DETAILS** | | | | | | | | |
| Passport Type | | | ( ) Diplomatic ( ) Official ( ) Ordinary | | | | | |
| Passport Number: | |  | | | | Date of birth : |  | |
| Date of Issue: |  | | | Date of Expiry: |  | Place of Issue: | |  |

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| **TRAVEL INFORMATION** | | | | | |
| **Arrival** | | | **Departure** | | |
| Date | Flight Number | Time | Date | Flight Number | Time |
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Kindly complete this form and send it together with a scanned copy of the information page of your **passport** and one 2″ x 2″ digital passport-sized photo, **no later than 22 August 2019**. Please forward   
(e-mail) the filled in the Form to the Host Secretariat with a copy to the APA Secretariat in Tehran:

|  |
| --- |
| **CC to APA Secretariat:**  **Email: secretariat@asianparliament.org**  **Phone: (+98-21) 33517406 - 7**  **Fax: (+98-21) 33517408** |

**Host Secretariat:**

**Email: apairaq2019@gmail.com**

|  |  |
| --- | --- |
| **Contact Person:** | Mr. Wameed Ali Shukr |
| **Tel & :** | 009647809295779 |